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Application No. 10/659,169
Filing Date: September 10, 2003
Title: Manufacture Of Polyethylenes
Attorney Docket No. CL1518 US CNT

- Amendment and Response to Final Office Action Dated January 12, 2005
- Notice of Appeal
- Petition For Extension of Time (One Month)
- Fee Transmittal
- Transmittal
- Receipt Card



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PTO/SB/21(08-00)

Approved for use through 10/31/2002. OMB 0651-0031

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(to be used for all correspondence after initial filing)

		Application Number	10/659,169
		Filing Date	September 10, 2003
		First Named Inventor	Wang
		Group Art Unit	1713
		Examiner Name	R. Rabago
Total Number of Pages in This Submission	14	Attorney Docket Number	CL1518 US CNT

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request (1 mo) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input checked="" type="checkbox"/> Appeal Communication to Board of Appeals and Interferences (Notice of Appeal) <input type="checkbox"/> Appeal Communication to Group <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Certificate of Mailing Receipt Card	
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Rakesh Mehta (Reg. No. 50,224)	
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